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DATE: February 15, 2006

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FROM: Theodore R. West Direct Dial: (717) 237-5349

TOTAL NUMBER OF PAGES, INCLUDING THIS COVER LETTER: 37

**MESSAGE:**

In re Application No.: 10/726,361, Filed: December 3, 2003  
First Named Inventor: SKOOG, et al.  
Docket No.: 07783-0087

**Please deliver to Examiner TUROCY, Art Unit 1762**

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**FAX NUMBER: (717) 237-5300**

SECRETARY RESPONSIBLE: Kathy Sauter TELEPHONE: (717) 237-5327

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PTO/SO/21 (02-04)

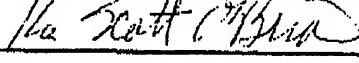
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/726,361
		Filing Date December 3, 2003
		First Named Inventor SKOOG, et al.
		Art Unit 1762
		Examiner Name TUROCY
Total Number of Pages in This Submission 37		Attorney Docket Number 13DV-13673 (07783-0087)

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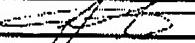
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Alter Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <b>Certificate of Facsimile Transmission</b>
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	McNees Wallace & Nurick LLC K. Scott O'Brian, Attorney Reg. No. 42,946	
Signature		
Date	February 15, 2006	

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Typed or printed name	Theodore R. West		
Signature		Date	February 15, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4018).

# FEE TRANSMITTAL

## For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

250.00

## Complete If Known

Application Number	10/726,361
Filing Date	December 3, 2003
First Named Inventor	SKOOG, et al.
Examiner Name	TUROCY
Art Unit	1762
Attorney Docket No.	13DV-13673 (07783-0087)

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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

## Small Entity

## Fee (\$)

## Fee (\$)

## Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

## Fee (\$)

## Fee (\$)

## Fee (\$)

200 100

Multiple dependent claims

## Fee (\$)

## Fee (\$)

## Fee (\$)

360 180

## Total Claims

## Extra Claims

## Fee (\$)

## Fee Paid (\$)

## Multiple Dependent Claims

## Fee (\$)

## Fee Paid (\$)

## Indep. Claims

## Extra Claims

## Fee (\$)

## Fee Paid (\$)

## - 20 or HP =

x

=

## HP = highest number of total claims paid for, if greater than 20.

## - 3 or HP =

x

=

## HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

## 4. OTHER FEE(S)

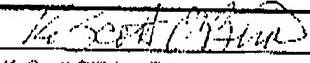
Non-English Specification. \$130 fee (no small entity discount)

## Fee Paid (\$)

Other (e.g., late filing surcharge): One-Month Extension of Time Fee: Terminal Disclaimer Fee

250

## SUBMITTED BY

Signature		Registration No (Attorney/Agent)	42,916	Telephone	(717) 232-8000
Name (Print/Type)	K. Scott O'Brien, Esq.			Date	February 15, 2006

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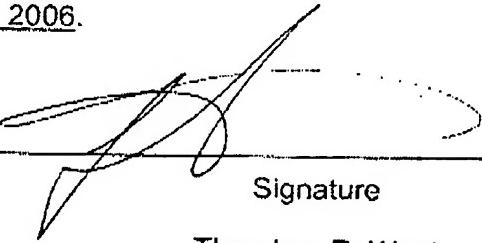
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Transmittal Form (1 page)

Fee Transmittal Form (1 page, in duplicate)

Petition for One-Month Extension of Time (1 page, in duplicate)

Terminal Disclaimer (1 page)

Response under 37 CFR 1.111 (29 pages)

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